PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART I

Application or Docket Number

09990188

OTHER THAN

CLAIMS AS FILED - PART								SMALL ENTITY		OTHER THAN		
			(Column 1)		(Column 2)		T	YPE	<u> </u>	OR_	SMALL	
TOTAL CLAIMS			86					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		Į	BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			minus 20=		• 66			X\$ 9=	59y	OR	X\$18=	5947
INDEPENDENT CLAIMS			2 minus 3 =		* 18			X42=	75%	OR	X84=	756
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	L	TOTAL	1120	OR	TOTAL	2090
CLAIMS AS AMENDED - PART II								_	71	-	OTHER	THAN
	O.	(Column 1)		(Column 2) (Column 3)			_	SMALL E	NTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUN PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CL					IT CLAIM		ן ו	+140=		OR	+280=	
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
		(0.1		(Cale	·~~ 2\	(Column 3)		ADDII. FEE I		•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
_	<u> </u>	(Column 1) CLAIMS	T ,		umn 2) HEST	(Column 3)	1 r		ADDI-	1	<u> </u>	ADDI-
4 8		REMAINING AFTER		1	MBER /IOUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
AMENDMENT B		AMENDMENT	<u> </u>	PAI	D FOR	-	┨╏		FEE	┨	 	FEE
	Total	*	Minus	**		=	↓	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	UT OL ALL	<u> =</u>	┨╏	X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	OLTIPLE DE	PENDE	VI CLAIM	<u>L_</u>		+140=		OR	+280=	
							ļ	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEI	
		(Column 1)		(Col	umn 2)	(Column 3)		ADDIT. FEE			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
l-	1 .	CLAIMS		HIC	SHEST	1	۱ [ADDI-	1		ADDI-
υ ⊢		REMAINING AFTER			IMBER VIOUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
		AMENDMENT	_	PA	ID FOR		-		FEE	-		FEE
	Total	*	Minus	**		=]	X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	*	Minus	***		=	╣	X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						_	+140=		OR	+280=	
	If the entry in col	umn 1 is less than	the entry in co	lumn 2, w	rite "0" in c	olumn 3.		TOTAL		4	TOTA	L L
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE											E	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												